Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Lifective October 1, 2000									108	24	-141	·
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY OTHER THAI					
TOTAL CLAIMS			28				RAT	E	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00
1	OTAL CHARGE	2-8 minus 20=		t .	8	X\$ 9	=	72 .	OR	X\$18=		
	DEPENDENT C	3 minus 3 =		*		X43	=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							+145	=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	\L	457	OR	TOTAL	1 34
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMAL	OTHER THAN SMALL ENTITY OR SMALL ENTIT				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMB PREVICE PAID I	EST BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9:	=		OR	X\$18=	
	Independent	* .	Minus	***		= .	X43=			OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=			OR	÷290=	
							TOT ADDIT, FI	AL			TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)								= L		'	KUUII. PEEI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		· HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA	RATE	- 1	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	· · · · ·	=	X\$ 9≃	.		OR	X\$18=	
	Independent	*	Minus	***		=	X43=			OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=			QЯ	+290=	
								ÀL -		OR ,	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDM ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER JSLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	***		=	X\$ 9=		, .	OR	X\$18=	
WE!	Independent	* .	Minus	***		=	X43=	\top		OR	X86=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+		Ī		
* 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									DR L	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***This is the bighost symbol (syndia) the appropriate box in column 1.												